FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject							
to Section 16. Form 4 or Form 5							
obligations may continue. See							
Instruction 1(b).							

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Monia Brett P						2. Issuer Name and Ticker or Trading Symbol IONIS PHARMACEUTICALS INC [IONS]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Office (Size title Check C					vner
(Last) 2855 GA	(Fii ZELLE CO	,	Middle))	3. Date of Earliest Transaction (Month/Day/Year) 02/16/2024									X	below	er (give title w) Chief Executiv		Other (s below) Officer	specify
(Street) CARLSBAD CA 92010						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
															Form Perso	filed by More than One Reporting on			orting
(City)	(St	ate) (Ž	Zip)		Rul	e 10)b5-	1(c)	Tra	ารลด	tion Ind	icatio	on '						
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												nded to					
		Table	I - N	on-Deriva	tive S	Secur	rities	Acc	quirec	d, Dis	sposed of	, or E	enefici	ally	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Year) Executi		emed tion Date, n/Day/Year)				Acquired (A) or (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Foll Reported		ties cially I Following	Form (D) o	Ownership orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)	Price	Trans		action(s) 3 and 4)			(Instr. 4)			
Common Stock 02/16/2					024				S		387	D	\$44.49	173,751		3,751		D	
		Tal	ble II	- Derivati (e.g., pu							osed of, convertib				wne	d			
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		ution Date,	4. Transaction Code (Instr. 8)		of	ired r osed) : 3, 4	Expiration (Month/Days		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)				9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

By: Patrick R. O'Neil,

Attorney in fact For: Brett P. 02/16/2024

Monia

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).